Sano Baseball Development (SBD) Training Waiver and Release of Liability

Dominican Republic Trip June 4th to 11th 2025

- **1. Acknowledgment of Risk: ** I undersigned, acknowledge that participating in baseball training with Sano Baseball Development (SBD) involves inherent risks of injury. I understand these risks and voluntarily agree to let my child participate in these training sessions conducted by SBD.
- **2. Voluntary Participation: ** | confirm that my child's participation with Sano Baseball Development (SBD) is entirely voluntary and understand these sessions are conducted during your free time.
- **3. No Insurance Provided: **
 | understand that Sano Baseball Development (SBD) and
 [Your Name do not provide any form of insurance
 coverage for injuries or accidents that may occur during
 the training sessions.

**4. Release of Liability: ** | hereby release and hold harmless Sano Baseball Development (SBD) and Edwin Sano from any claims, demands, or lawsuits that may arise from any injuries, damages, or losses my child may sustain during the training sessions.

Dominican Republic Trip

On this day I agree that my child will be participating in this trip to the Dominican Republic (DR) during the summer 2025(June 4th to June 11th 2025). I acknowledge that participating in this baseball trip, it will be out of the country and I'm fully informed and agree that either mom or dad will be going to this trip. We are agreeing on that we will having practice, games, community service and some other activities. As knowing that one of us (Parents) will be going with our child we take full responsibility on everything that happens during the time of the trip June 4th – June 11th, 2025.

We are agreeing on participating in this event knowing that one of us will be with our son during this trip and we take fully responsibility on flights, hotels and activities that we will be doing in the Dominican Republic. We are agreeing on going to the Dominican Republic from June 4th to June 11th, 2025, which are the dates we will be

participating on the event. If we decide to go before or stay after those days, it is all our responsibility as parents. The Accompanying parent is fully responsible for their child inside the resort Sunscape Dominicus and outside of the resort. At least one parent must attend all of the events with Sano Baseball Development outside of the resort.

- **5. Emergency Medical Treatment: ** In the event of an injury, I authorize on behalf of Sano Baseball Development (SBD), to seek emergency medical treatment for my child. I agree to be responsible for any expenses incurred due to this treatment.
- **6. Parent/Guardian Responsibility: ** as the parent/guardian, take full responsibility for my child's health and well-being during and after participation in the training sessions with Sano Baseball Development (SBD).
- **7. Agreement Understanding: ** By signing this waiver, I affirm that I have fully read and understand its contents and agree to the terms voluntarily as they pertain to my child's involvement with Sano Baseball Development (SBD).

8. Videos during the practice

I also understand as a parent or guardian of the child that the practices with Sano Baseball Development are recorded and take pictures for the purpose of making content for media networks and to have videos to see my child's progress. I take responsibility for the fact that this is not a problem for me or my son, and at no time would I sue the company for this action.

HAVE READ THIS WAIVER & RELEASE AGREEMENT, FULLY UNDERSTAND ITS TERMS. UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. I UNDERSTAND THE SERIOUSNESS OF, AND ACCEPT, THE RISKS INVOLVED IN PARTICIPATING IN THE TRAINING AND THE ATHLETE'S PERSONAL RESPONSIBILITIES FOR FOLLOWING ALL OF THE RULES OF THE TRAINING.

**Parent/Guardian Name: **
When they book the lesson online

**Signature: **

Being agreed with the waiver

**Date: **

When they book the lesson online